



Testimony Submitted to the Appropriations Committee on February 27, 2015

HB 6824: An Act Concerning The State Budget For The Biennium Ending June Thirtieth 2017

Submitted by Gustave Keach-Longo Vice President of Senior Services, Community Renewal Team

Senator Bye, Representative Walker, members of the Appropriations Committee:

My name is Gus Keach-Longo and I am Vice President of Senior Services for the Community Renewal Team. I joined CRT 10 years ago to open and operate The Retreat Assisted Living, one of the State Assisted Living Demonstration Pilots here in Harford. I am pleased to appear before you this morning to present testimony concerning potential changes to the funding of the CT Home Care Program for Elders (CHCPE) Category 1.

CHCPE provides an array of home care services to seniors in the community. It helps eligible state residents remain in their homes instead of prematurely going to nursing facilities. Category 1 offers limited home care services for moderately frail elders who are at risk of hospitalization or short-term nursing home placement with one or two critical needs. It is solely funded through state dollars and currently has a cost share of seven percent paid by the seniors. One possibility presented in the Governor's Budget is to increase the cost share to fifteen percent.

The Retreat was developed as one of four assisted living communities with the goal of saving State Medicaid funds being spent on long term care facilities. The Assisted Living Demonstration Pilot was designed to blend the CHCPE with affordable housing to create a model of assisted living which is affordable to moderate and low-income seniors.

The population we serve at The Retreat looks like this:

- They are 82 years old, on average, and receive over 17 of hours of care per week.
- Well over half of our seniors are without family support. They may be estranged from their families, or their relatives can't function as a family unit.
- 62% have some type of mental health concern and benefit from living with others for camaraderie and on-site psychosocial support (e.g. day-to-day redirecting and mental health counseling).
- 3% have experienced periods of homelessness.

The other proposal in the Governor's budget, besides increasing the cost-share, is the potential of closing Category 1 of CHCPE to new enrollees. This would have a negative impact on The Retreat and those whom we serve. Approximately 30 seniors (slightly less than 30%) currently residing at The Retreat have either



incomes slightly above the Medicaid threshold or are too able-bodied to have the three critical needs to qualify for Medicaid.

Prior to the Assisted Living Demonstration, the specific low income population served by The Retreat often found themselves in crisis. As they aged the coping skills they acquired during their lives to manage their responsibilities waned. This is often due to life-long mental health concerns (often undiagnosed). Many of these seniors were able to live week to week on their own when younger, but then struggle as their skills decreases. Sometimes they also were connected to family who helped them be successful. However, by the time they are seniors, relationships with supportive families often decreased (due to strains on the relationships over the years or older family members have passed on). In fact, at times as much as seventy percent of the seniors residing at The Retreat have no connections to family.

The seniors mentioned above often face issues associated with not taking medications properly, not following medical treatments, and suffering from moderate self-neglect. Many of these seniors need onsite supports to help them cope with their challenges, which an assisted living environment supports well. Over time, The Retreat has evolved to fill the gaps in the elder care system for these individuals, who are healthy enough to not need hands-on care (e.g. assistance with showers), but do need an onsite flexible support structure when they are overwhelmed with their emotions.

Seniors at The Retreat are able to reside in their own residences and maintain their privacy and dignity while receiving the onsite wrap around supports whenever needed. These individuals are often able-bodied, so they do not have three critical needs. However, they often struggle with challenges not well supported in traditional home settings. Since there is no staff around throughout the evenings and weekends in other low-income housing settings, these seniors struggle during periods of the day when specific services through the CHCPE are not scheduled. These individuals do not need the environment of a skilled nursing facility, and they do not need 24 hour live in caregivers. They need the supports associated with an assisted living setting, though not as much actual hands-on care to qualify for three critical needs based on the definitions of “Activities of Daily Living.” For these seniors, The Retreat allows them to remain in the least restrictive environment.

This balance of support services and privacy is hard to achieve in a typical low-income housing site with scheduled services. Often the emotional challenges these members experience occur off-hours and are unplanned. This can lead to higher-risk situations, or more rapid decline, for the seniors than necessary. The Retreat fills this gap in the State’s continuum of care for seniors.

With the closing of Category 1 on CHCPE, these individuals, or future applicants in similar situations, would no longer be eligible to live at The Retreat. They would be at risk of:

- Eviction,
- Social isolation leading to depression,
- Services not readily available for redirection and support,
- Avoidable behavioral disturbances,



- Neglectful situations.

Closing or eliminating the Category 1 of the CHCPE will ensure that fair a portion of our low-income seniors who just need the readily available wrap around services would struggle to remain in the least restrictive environment in the community.

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